FORM D

UNITED STATES
SECURITIES AND EXCHANGE CONTINUESTONED
Washington, D.C. 20539

FORM(D

MAR 2 5 2005



NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION BY SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

Prefix Serial

DATE RECEIVED

1137612

Filing Under (Check box(es) that apply): Type of Filing: New Filing Amendment	504 Rule 505 Rule 506 Section 4(6)	☐ ULOE
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer		
Name of Issuer (check if this is an amendment	and name has changed, and indicate change.)	
Organ Transport Systems, Inc.		
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
2611 Internet Blvd.	Frisco, Texas 75034	214-618-7905
Address of Principal Business Operations (if different from Executive Offices)	Telephone Number (Including Area Code)	
2611 Internet Blvd.	Frisco, Texas 75034	214-618-7905
Brief Description of Business Development and Marketing of a Portable Org	an Preservation and Transport Device	PROCESSED
Type of Business Organization	_	MAR 3 0 2005
	partnership, already formed other (partnership, to be formed	olease specify): THOMSON FINANCIAL
Actual or Estimated Date of Incorporation or Organization (Enter	Month Year ation: 0 7 9 9 Actual Estin two-letter U.S. Postal Service abbreviation for State	nated ::

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

		A. BA	SIC IDENTI	FICATION DATA			
2. Enter the information re	equested for the fo	llowing:					
• Each promoter of	the issuer, if the is	suer has been org	anized within	the past five years;			
Each beneficial ow	ner having the pow	er to vote or disp	ose, or direct th	e vote or disposition	of, 10% or more o	f a class of	f equity securities of the issuer.
 Each executive off 	icer and director o	f corporate issue	rs and of corpo	rate general and ma	naging partners of	partnersh	ip issuers; and
 Each general and r 				· ·	· · · ·	•	•
Check Box(es) that Apply:	Promoter	■ Beneficial	Owner 🔽	Executive Officer	✓ Director		eneral and/or Managing Partner
Full Name (Last name first, i White, Hyman P.	f individual)						
Business or Residence Addre 1814 Tree House Lane	ess (Number and	Street, City, Stat	e, Zip Code)	Plano, Texas 7	5023		
Check Box(es) that Apply:	Promoter	Beneficial	Owner [Executive Officer	Director		neral and/or fanaging Partner
Full Name (Last name first, i	f individual)						
Fleming, Charles L.							
Business or Residence Addre	ss (Number and	Street, City, Stat	e, Zip Code)				
5214 Court of York				Houston, Texas	77069		
Check Box(es) that Apply:	Promoter	Beneficial	Owner [Executive Officer	Director		neral and/or fanaging Partner
Full Name (Last name first, i Rochester, L. Paul	f individual)				· · · · · · · · · · · · · · · · · · ·		
Business or Residence Addre	ss (Number and	Street, City, Stat	e, Zip Code)	 	······································		
103 Timberon Trail				Ruidosa, New I	Mexico 88345		
Check Box(es) that Apply:	Promoter	Beneficial	Owner [Executive Officer	Director		neral and/or fanaging Partner
Full Name (Last name first, i	f individual)						
Business or Residence Addre	ss (Number and	Street, City, Stat	e, Zip Code)				
Check Box(es) that Apply:	Promoter	Beneficial	Owner [Executive Officer	Director	_	neral and/or Ianaging Partner
Full Name (Last name first, i Burman, Darryl	f individual)	·					
Business or Residence Addre	`	Street, City, Stat	e, Zip Code)	Houston, Texas	s 77027		
Check Box(es) that Apply:	Promoter	Beneficial	Owner 🗸	Executive Officer	Director		neral and/or lanaging Partner
Full Name (Last name first, i Holder, Michael B.	f individual)						
Business or Residence Addre 10887 Crooked Creek D	,	Street, City, Stat	e, Zip Code)	Dallas, Texas	75229		
Check Box(es) that Apply:	Promoter	Beneficial	Owner	Executive Officer	Director		neral and/or Ianaging Partner
Full Name (Last name first, i	f individual)						
Business or Residence Addre	ss (Number and	Street, City, Stat	e, Zip Code)				
	(Use bla	nk sheet, or copy	and use additi	onal copies of this s	heet, as necessary)	

	12 (1) 12 (2)		. 5 V	· _ *	B. 1	NFORMAT	ION ABOU	T OFFERI	NG	i re-1	*	J. 3-4-	
1	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?											Yes	No
1.	Answer also in Appendix, Column 2, if filing under ULOE.												×
2.												_{\$} 5,0	00.00
	·											Yes	No
3.												K	
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Cull Name (Last name first, if individual)												
Ful	Name (Last name f	first, if indi	vidual)									
Bus	iness or	Residence	Address (N	umber and	d Street, C	ity, State, Z	Lip Code)	· · · · · · · · · · · · · · · · · · ·					
Nar	ne of As	sociated Bro	oker or Dea	aler									
Stat		ich Person											
	(Check	"All States	" or check	individual	States)								l States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Ful	Name (Last name f	īrst, if indi	vidual)									
Bus	iness or	Residence	Address (N	Number an	d Street, C	City, State,	Zip Code)						
Nar	ne of As	sociated Bro	oker or Dea	aler									
Stat	es in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States"	" or check	individual	States)							☐ Al	l States
	AL	AK	ΑZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	[ID]
		ĪN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Ful	Name (Last name f	first, if indi	vidual)									
Bus	iness or	Residence	Address (N	Number an	d Street, C	City, State, 2	Zip Code)		_ 				
Nar	ne of As	sociated Bro	oker or Dea	aler									
Stat	es in Wh	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States"	" or check	individual	States)	••••••	••••••	***************************************	••••••	••••••		☐ All	l States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already

	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity		
	Common Preferred		*
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests		
	Other (Specify)		\$
	Total		
	Answer also in Appendix, Column 3, if filing under ULOE.		~
2.	Enter the number of accredited and non-accredited investors who have purchased securities in thi offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicat the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	2	Aggragata
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	1	\$_75,000.00
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)	1	\$ 75,000.00
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities old by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of th securities in this offering. Exclude amounts relating solely to organization expenses of the insurer The information may be given as subject to future contingencies. If the amount of an expenditure i not known, furnish an estimate and check the box to the left of the estimate.	•	
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$
			¢ 0.00

	C. OFFERING PRICE, NU	MBER OF INVESTORS, EXPENSES AND USE	OF PROCEEDS	· · · · · · · · · · · · · · · · · · ·
	b. Enter the difference between the aggregate of and total expenses furnished in response to Part C proceeds to the issuer."	- Question 4.a. This difference is the "adjusted	gross	1,500,000.00
5.	Indicate below the amount of the adjusted gross each of the purposes shown. If the amount for check the box to the left of the estimate. The total proceeds to the issuer set forth in response to P	any purpose is not known, furnish an estimate l of the payments listed must equal the adjusted	e and	
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		S 600,000.0C	\$ 150,000.00
	Purchase of real estate			
	Purchase rental or leasing and installation of m	nachinery	—	
	and equipment		🗆 \$	2 \$ 20,000.00
	Construction or leasing of plant buildings and i	facilities	[] \$	☑ \$_30,000.00
	Acquisition of other businesses (including the voffering that may be used in exchange for the a	value of securities involved in this seets or securities of another		
	issuer pursuant to a merger)			
	Repayment of indebtedness		🔽 💲 150,000.00	300,000.00
	Working capital			
	Other (specify):		[\$	\$
			 	\$
	Column Totals		750,000.00	\$ 750,000.00
	Total Payments Listed (column totals added)		· 	00,000,000
int		D. FEDERAL SIGNATURE		
ig	e issuer has duly caused this notice to be signed by t nature constitutes an undertaking by the issuer to i information furnished by the issuer to any non-a	furnish to the U.S. Securities and Exchange Co.	mmission, upon writter	
SS	uer (Print or Type)	Signature	Date	
Or	gan Transport Systems, Inc.	Michael Holder	3/11/05	
Va:	me of Signer (Print or Type)	Title of Signer (Print or Type)		
		ł.		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

-1		E. STATE SIGNATURE	9.6	
1.		CFR 230.262 presently subject to any of the disqualification	Yes	No X
	1	See Appendix, Column 5, for state response.		

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
Organ Transport Systems, Inc.	Muhail Holder	3/11/05
Name (Print or Type)	Title (Print or Type)	
Michael B. Holder	CEO	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX 1 2 3 4 5 Disqualification Type of security under State ULOE and aggregate Intend to sell (if yes, attach explanation of to non-accredited offering price Type of investor and investors in State offered in state amount purchased in State waiver granted) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Non-Accredited Accredited Yes Yes No State No **Investors** Amount **Investors** Amount ALAK AZAR CACO CTDE DC FL $\mathsf{G}\mathsf{A}$ HI ID IL IN IΑ KS KY LA ME MD MA MI MN MS

APPENDIX 2 1 3 Disqualification Type of security under State ULOE Intend to sell and aggregate (if yes, attach to non-accredited offering price Type of investor and explanation of investors in State offered in state amount purchased in State waiver granted) (Part C-Item 2) (Part E-Item 1) (Part B-Item 1) (Part C-Item 1) Number of Number of Non-Accredited Accredited Yes No **Investors Investors** Yes No State Amount Amount MO MT NE NV NH NJ NM NY NC ND OH OK OR PA RI SC SD TNCommon Stock \$75,000.00 0 TX1 X x UT VT VAWAWV WI

APPENDIX										
1		2	3		4					
	to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WY										
PR										